DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider	JUSTICE RESOURCE INSTITUTE	Provider Address	1671 Worcester Road Suite 100, Framingham
Survey Team	Hampton, Cheryl; Hayes, Leslie; MacPhail, Lisa; Vautour, Danielle;	Date(s) of Review	23-NOV-15 to 24-NOV-15

Follow-up Scope and results :						
Service Grouping	Licensure level and duration	# Critical Indicators std. met/ std. rated at follow-up	# Indicators std. met/ std. rated at follow- up	Sanction status prior to Follow-up	Combined Results post- Follow-up; for Deferred, License level	Sanction status post Follow-up
Employment and Day Supports	2 Year License		3/6	⊠ Eligible for new business (Two Year License)	2 Year License	☑ Eligible for New Business (80% or more std. met; no critical std. not met)
2 Locations 8 Audits				☐ Ineligible for new business. (Deferred Status: Two year midcycle review License)		☐ Ineligible for New Business (<=80% std met and/or more critical std. not met)
Residential and Individual Home Supports	2 Year License		6/10	Eligible for new business (Two Year License)	2 Year License	Eligible for New Business (80% or more std. met; no critical std. not met)
5 Locations 8 Audits				☐ Ineligible for new business. (Deferred Status: Two year midcycle review License)		☐ Ineligible for New Business (<=80% std met and/or more critical std. not met)

Summary of Ratings

Residential and Individual Home Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L8
Indicator	Emergency Fact Sheets
	In all cases the emergency fact sheets were in place, however, in four of eight individuals surveyed, the emergency fact sheet was missing relevant medical information. The agency must ensure all medications, allergies, and relevant medical diagnoses are listed on the emergency fact sheet. The information listed on the health care record should be consistent with the information listed on the emergency fact sheet.
Status at follow-up	All of the individuals reviewed had emergency fact sheets on site which were current and accurate.
#met /# rated at followup	5/5
Rating	Met

Indicator #	L15
Indicator	Hot water
Area Need Improvement	In two of eight locations surveyed the water tested above 120 degrees. The agency must ensure the water temperature reads between 110 and 120 degrees.
Status at follow-up	The two locations surveyed were found to be in compliance with hot water temperatures.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L43
Indicator	Health Care Record
	While each individual had an up to date health care record on file, the medical information was not always consistent with the emergency fact sheet. The agency must ensure all pertinent medical information is included in the health care record.
Status at follow-up	The agency had correctly maintained and updated the health care record in the two locations

	reviewed.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L60
Indicator	Data maintenance
	The behavior plan reviewed during the survey showed that the agency was not consistently maintaining data for each target behavior. The agency must ensure it is taking data on all behavior plans to determine the efficacy of the behavioral interventions.
Status at follow-up	In the one plan reviewed, the agency was found to be in compliance with consistently maintaining the data on behavioral interventions.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L63
Indicator	Med. treatment plan form
	While all of the individuals had the necessary medication treatment plans in place, the plans did not include all of the necessary information, and therefore were incomplete. The medication treatment plan must define how the behaviors are manifested for the specific individual. Once these behaviors are determined, the agency must collect data on these behaviors to determine the efficacy of the medication.
Status at follow-up	Two of three medication treatment plans were in place and included the required components. One plan did not include a medication which required a medication treatment plan.
#met /# rated at followup	2/3
Rating	Not Met

Indicator #	L64
Indicator	Med. treatment plan rev.

	The agency must ensure each medication treatment plan is reviewed by the ISP team. The agency should send each plan to the service coordinator and retain evidence of sending the plan. In addition, if the ISP is sent out without the plan being referenced, the agency must contact the service coordinator to add it to the plan.
	The medication treatment plans were reviewed by the required groups in the one of three plans reviewed. A plan was not in place for a medication requiring a medication treatment plan; therefore, it could not be reviewed. The other plan had been completed after the ISP and the agency was unable to provide evidence of having sent the plan to the Service Coordinator.
#met /# rated at followup	1/3
Rating	Not Met

Indicator #	L67
Indicator	Money mgmt. plan
	In four of eight individuals surveyed, the agency did not have an individual specific training plan in place for individuals it assists with money. When there is a shared and delegated responsibility, the agency must ensure there is a plan in place for all individuals capable of learning to become more financially independent
	All of the individuals reviewed had plans in place or the individual's ISP indicated the individual would not benefit from a training plan.
#met /# rated at followup	4/4
Rating	Met

Indicator #	L69
Indicator	Expenditure tracking
	The agency has developed a new system for tracking expenditures, which if completed correctly would satisfy this regulation. The agency must ensure all expenditures are tracked in real time and not based on the receipt.
Status at follow-up	The agency was found to be correctly documenting and tracking individuals expenditures for all four individuals reviewed.
#met /# rated at followup	4/4

Rating	Met

Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L15
Indicator	Hot water
	In one of two locations surveyed the water tested above 120 degrees. The agency must ensure the water temperature reads between 110 and 120 degrees.
•	When tested, the hot water temperature was too hot at 124 degrees. The agency corrected the water temperature immediately.
#met /# rated at followup	0/1
Rating	Not Met

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	The ISP assessments are requested on HCSIS by the service coordinator at least thirty days in advance of an ISP with a due date of fifteen days in advance of the ISP meeting. In three of five individuals surveyed, the agency did not submit the required assessments to DDS fifteen days in advance. The agency must ensure it is submitting the required assessments at least fifteen days in advance of the ISP.
Status at follow-up	For the two ISPs that occurred since the service enhancement meeting, the required assessments were submitted on time.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	The ISP support strategies are requested on HCSIS by the service coordinator at least thirty days in advance of an ISP with a due date of fifteen days in advance of the ISP meeting. In three of five

	individuals surveyed, the agency did not submit the support strategies to DDS fifteen days in advance. The agency must ensure it is submitting the support strategies at least fifteen days in advance of the ISP.
•	For the two ISPs that occurred since the service enhancement meeting, the required support strategies were submitted on time.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L88
Indicator	Strategies implemented
	In some instances the progress notes did not reflect the strategies and objectives agreed to in the support strategy. The agency must ensure it is fulfilling its obligation of assisting the individuals to work towards meeting their goals. The progress notes must reflect the individuals' progress gathered through the data taken.
•	All of the individual audits showed that documentation was in place regarding implementation of support strategies.
#met /# rated at followup	3/3
Rating	Met

Administrative Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L48
Indicator	HRC
	The Human Right Committee met on a quarterly basis over the past two years. Of the fourteen meetings reviewed during the survey, the clinical professional attended two meetings. The agency must ensure the necessary composition is consistently maintained; and when a member is absent, a plan must be in place to ensure the intended documents are reviewed.
	There were two Human Right Committee Meetings since the service enhancement meeting. The agency has two Human Rights Committees, one of the two committee meetings did not have a lawyer present for the meeting and therefore the committee was not fully constituted.

#met /# rated at followup	1/2
Rating	Not Met

Indicator #	L65
Indicator	Restraint report submit
Area Need Improvement	In the past thirteen months, the agency recorded three restraints in HCSIS. The agency did not meet all of the timelines for reporting the restraints in HCSIS as the restraint manager did not finalize the report within five days. The restraint manager must finalize the restraint report and submit it to DDS within five days of the restraint occurrence.
Status at follow-up	There were three restraints since the service enhancement meeting. The agency met the required timelines for two of the three restraints. For the third restraint, the restraint manager did not finalize the report within five days.
#met /# rated at followup	2/3
Rating	Not Met